

MEMORANDUM

DATE: APRIL 20, 1993

RE: CONFERENCE ON THE RISK ASSESSMENT PARADIGM AFTER TEN YEARS: POLICY AND PRACTICE THEN, NOW, AND IN THE FUTURE, APRIL 5-8, 1993, WRIGHT-PATTERSON AIR FORCE BASE, OHIO

This conference was intended to provide a 10-year perspective on use of the risk assessment paradigm, which was first introduced by the National Academy of Sciences in 1983. The essential aspects of this paradigm are that it distinguished identification and description of risk from the process of doing something about risk. This is the distinction between risk assessment versus risk management. On the risk assessment side, hazards are identified and dose-response relationships are determined. This information is evaluated, together with exposure data, in order to "characterize" the risk. On the risk management side, regulatory and policy decisions are made based on the risk characterization data, but also based on the available options for control of the hazards, and based on an evaluation of several nonrisk types of issues relating to, for example, economics, politics, statutory and legal considerations and various social factors.

Smoking or ETS was not a theme at the conference, except in the presentation by Steven Bayard (U.S. EPA), which summarized the EPA risk assessment on ETS and lung cancer and respiratory disease in children. Bayard's presentation is discussed later in this memo.

The conference consisted of six sessions, each composed of five or more presentations given on a morning or an afternoon. Session I consisted of presentations centering on basic descriptions of risk assessment and risk management, using the paradigm set forth in 1983 by the NAS. Session II consisted of presentations in which the paradigm was used in evaluating specific potentially toxic exposures (e.g., selenium, beryllium, dioxin and others). It was in this session that Steven Bayard reviewed the EPA's risk assessment on ETS. Session III was titled "Where the Paradigm Needs Change." Despite this title, there was no substantive criticism of the paradigm. Presenters and audience alike seemed to be in agreement as to the usefulness of the NAS paradigm. Sessions IV and V were both "scientific" sessions, presenting discussions of various chemicals, exposures and disease processes. The information in these presentations covered physiological

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